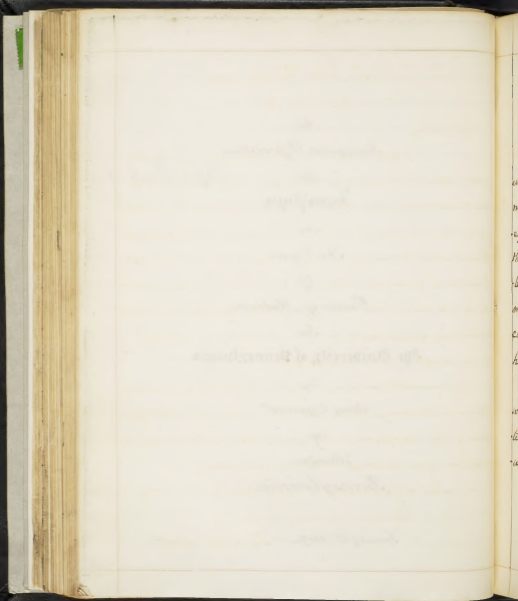


An
Inaugural Dissertation
On
Haemoptysis
For
The Degree
Of
Doctor of Medicine,
In
The University of Pennsylvania
By
Henry Lippincott
Of
Tallington
Pennsylvania

Repd March 1829

January 6th. 1829



To John Phillips M.D.
of Bristol Pa.

Dear Sir,

I feel anxious, in departing from you (under whose immediate and benevolent care have been directed my medical studies,) that I may be permitted the privilege of thus publicly returning you my most cordial thanks for the many distinguished services and attentions I have received, and hope that you will allow me to solicit a continuance of them, together with that confiding friendship, by the influence of which I have so often been benefitted.

To you therefore, as a person extensively acquainted with the Medical science, and whose usefulness in the practice of the profession, justly merits the distinguished reputation you have so happily acquired,

This dissertation is respectfully inscribed,

By your friend and pupil,

H. Lippincott.

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To the Medical Professors of the
University of Pennsylvania.

Gentlemen,

Being sensible of the very profitable information
I have derived from your valuable and interesting Lectures,
I am prompted to take the liberty of thus publicly tendering
you my most respectful acknowledgments; as also for the
many parental cautions with the good and instructive
advice (so necessary to the young practitioner) you have so
often been pleased to intersperse throughout the Lectures
of your individual and respective courses.

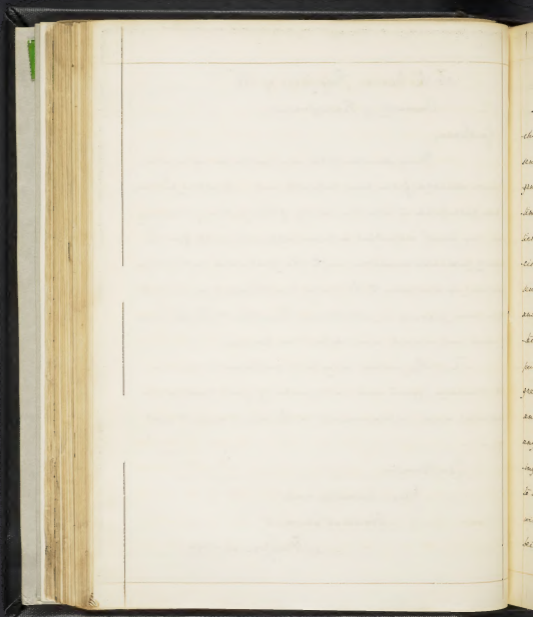
That the public may long continue to receive
the salutary effects and experience of your endless re-
searches and improvements is the most ardent wish
of,

Gentlemen

Your humble and

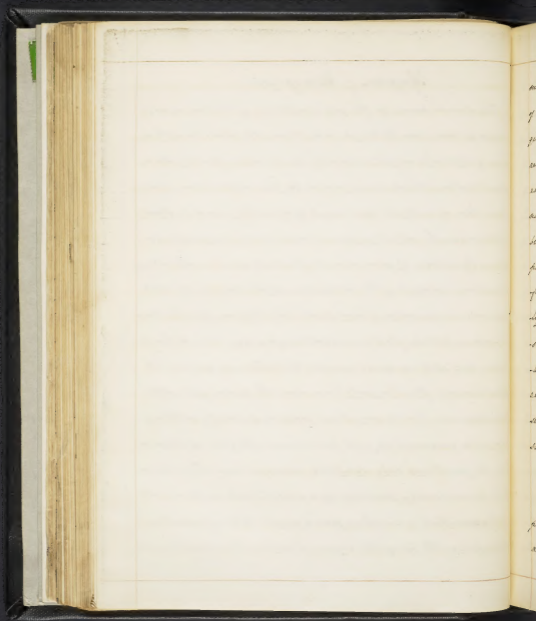
Obedient servant

W. Lippincott



Symptoms of Haemoptysis.

This disease means in the full acceptance of the term, a discharge of blood from the lungs, and it usually comes on with a sense of tightness, weight, or anxiety in the breast affecting the organs of motion, which are increased on full inspiration; sometimes there is a slight uneasiness of breathing, and a short tickling cough, which is much increased by moderate exercise. Symptoms of fever are also present, such as shivering sensations, coldness of the extremities, slight pains in the back and loins, a sensation of heat under the sternum, flushed countenance, laboured, flatulence, costiveness, a dry skin, &c. hard pulse; but still we must admit that there are subject to great variety, for I myself have seen the pulse full, soft, and frequent. Yet it sometimes comes on suddenly without any such warnings as just mentioned, the flow of blood being the first and only symptom observed, and this is said to be immediately preceded by a salted taste in the mouth, with somewhat of coughing from a slight tickling sensation being felt at the top of the larynx, to relieve this a hawking is



made, which brings up from the lungs a small portion of blood of a florid arterial colour, and of a frothy appearance, which is quite sufficient to characterize the disease; the irritation soon returns and in the same manner more is brought up with a rattling noise in the windpipe; the tongue generally wears a natural appearance; there is nothing worthy of notice in the blood drawn from a vein, except there exist a scrofulous predisposition in the system, in which, my Preceptor informs me he generally finds the blood ropy. — This is commonly the manner in which *Hæmoptysis* begins; in some instances the blood that is discharged is in very small quantity, and ceases spontaneously or is stopped by the remedies employed; in other cases a slight spitting continues for several days together, and is often renewed on very slight exertions.

Of the Remote Causes.

Having now given in as brief and concise a manner as possible some of the principal symptoms by which this disease may be characterized, I shall next proceed

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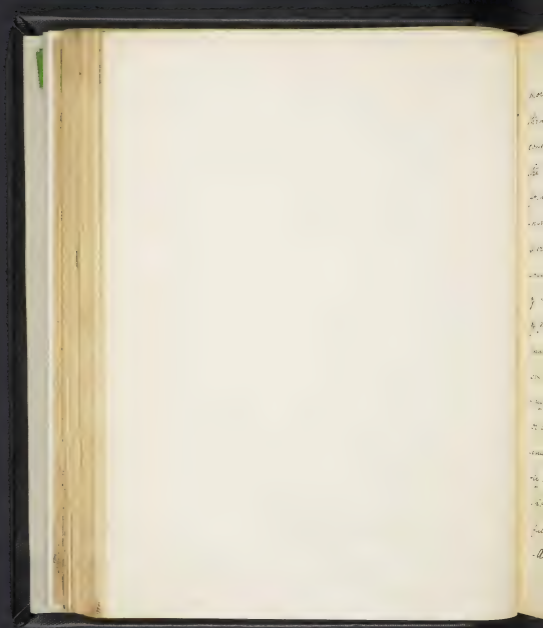
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The second and not little objection to this is that of a scrupulous and true scholar claims, requires an equal share of attention with the first especially from a comparison of it with a corresponding trait in more advanced and more numerous records. - But on the other hand, there are here more numerous records to be examined and a more liberal interpretation of it is in some cases quite warranted.

It here remains to be seen how far we can extend the regular time of life in which it appears. It was remarked by Hippocrates and was since been confirmed by more recent observation that tympany chiefly prevails in persons between the ages of fifteen and thirty years. It very rarely happens to children under twelve years of age, and is not present after that of five and thirty. It is therefore cases it may be said, are more numerous than there is a remarkable coincidence is testimony from the same at this period of life.

Of the Exciting Causes.

These we find are very numerous some acting



more immediately upon the mind and other interests
 through the medium of a general system. And which are
 considered the most important and that necessarily when
 the great blood vessels are increased in size or volume when
 in a contracted state, in the vessels of the brain either in the
 meninges, forming convulsions, disorders of the nervous system, or
 hemorrhages; and in the vessels of the lungs as in congestion
 and in the vessels of the stomach, bladder, &c. and in the vessels
 of the liver, &c. of the various organs of the body, &c. &c.
 & the various organs of the system. These vessels are
 immediately and necessarily affected, especially in the
 arteries, and which, as much as the heart, in a
 confined space, in the rooms and crowded assemblies
 &c. &c. some allay from some considerations and in the
 condition of the vessels of the system, where which appears
 to occasion the same effect, and is understood in
 some ascending very high positions, which is con-
 siderably increased in the system, and in the
 - And in further confirmation of these notions.

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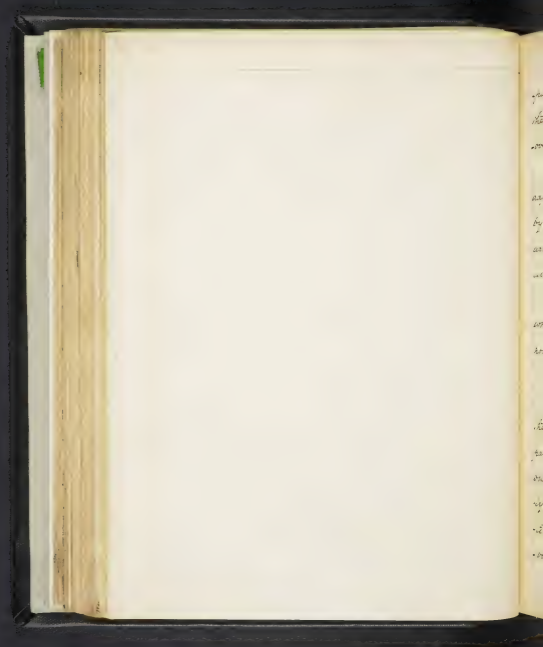
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Lichophaga

The most accurate test of its origin, as far as to determine from what internal part it comes, proceeds when thrown out of the mouth whether it is from the stomach, mouth, fauces, larynx, or any of the cavities of the nose or lungs.

It is distinguished from dermatomycosis inasmuch as most resembles, in size & colour, the dermatomycosis from the stomach are not attended by any pulmonary affection whatever, and it is not any great dyspnoea, pain or oppression in the chest: the vomit is not white or vomiting, and is uniformly known by its dark, black, and greenish appearance as also by being mixed with the contents of the stomach, and is commoner in young persons than when it proceeds from the lungs: the sputa is much more raised from a cough than of the stomach than from the lungs.

It is distinguished when coming from the internal surface of the mouth, by its being uncommon



purged with cough, dyspnoea & hæmoptoe, neither is there any pain or oppression in the thorax; and moreover may easily be seen in an examination.

When the blood proceeds from the trachea, passed, or arising cavities of the nose it may be expectorated by mere hawking, and generally it is of a slaty or arterial colour than when it is brought from the lungs.

The appearance of the blood and the manner in which it is brought from the lungs has already been noticed.

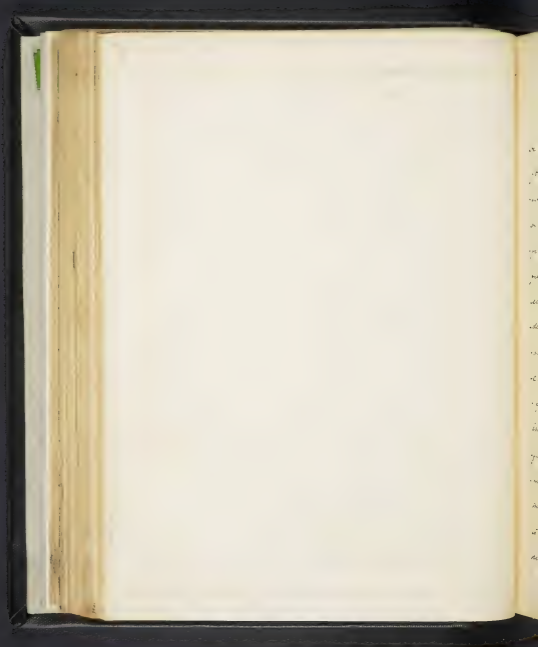
Prognosis.

Of the prognosis of diseases, it will be admitted, that the art is often very perplexing and embarrassing, particularly to predict with any sort of certainty on the termination of diseases, that are so frequently involved in obscurity, together with the consideration that patients often recover under very unfavorable circumstances, whilst others have risen



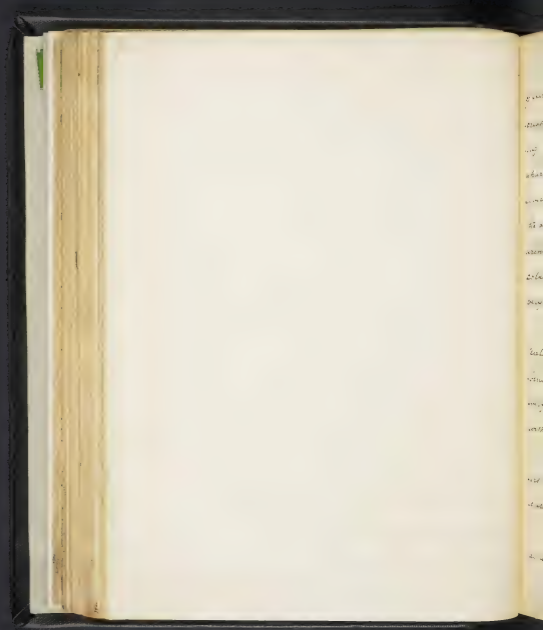
when the most favorable prognostics attended them: But of
 the present disease I think it is very rarely at-
 tended with essential danger. Professor Cuvier has never
 had one case of death from the infection, although in the
 course of his long and varied practice. So far as the disease
 is idiopathic and in the more common form is concerned, it
 may undoubtedly be considered as innocuous. In the case it is
 considered dangerous where no debility & debility follows
 there have been recorded no recoveries from the infection.

I am told by Dr. Baillie my physician that when seen
 it is a more or less distressing or an insupportable inflammation
 of the lungs, sometimes accompanied with hemorrhages, some-
 times in combination. It is said the prognosis is in general
 not even the efforts of the most active medical men to
 prevent its progress, and also when it strikes without
 a border and delicate nature, especially when noticed in
 females in a situation of the extreme of pregnancy, often
 the precursor of pulmonary consumption, and may be
 considered as an affection of the most dangerous import.



REMARKS.

In the treatment of *Scrophulous* our first attention must be directed to check the morbid secretion of blood and to give room for the repletion of a sound system of nutrition claims our notice and that we may secure ample supply from the blood, it is necessary to make a large opening in the means to supply food. The secretion more fully, and the flow of blood is immediately directed from the vessels which small and relaxed vessels can only produce a temporary relief from, and the patient is converted into a scrophulous and in appearance, which cases, these circumstances should always be carefully avoided. I am counselled a blood-letting in its effects I have perceived the intense exhibition of the chloride of sodium, given very copious in checking the repletion. It is generally administered in the dose of a grain every four or five minutes according to circumstances, sometimes the patient is take it in a dry state and as it produces debility in his mouth it swallows the solution in water. The next

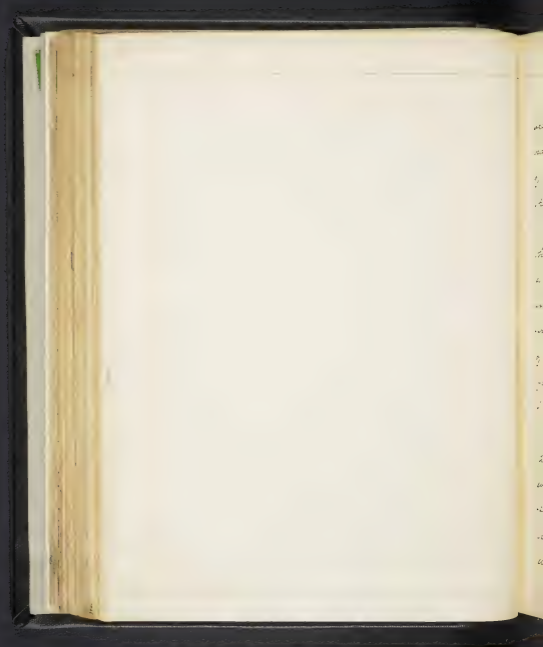


exercise should be avoided that would have a tendency to increase the circulation and more particularly that of speaking. Cold air should be, permitted to pass freely through the shirt and very careful as the weather becomes the patient covered with a few bed clothes is no more. In addition to the above may be administered ice or a cold rectified acetate. Much benefit has also resulted from the use of cold applications, such as the chest and arm, and which are very susceptible to the action of cold.

These remedies failing our next recourse may be to the use of opium in the dose of two or three grains combined with the fourth or fifth of a grain of opium given every two or three hours. This is a remedy I have employed with great advantage on several occasions.

Opium has claimed the attention of some practitioners as a remedy in hemorrhage and it has been recommended to prevent the occurrence than to check it.

The sulphates of zinc and copper given in much doses is to excite hæmorrhage may be of service.



In the most able physicians Lino and Catina have
 been employed but as their ability is not limited they
 have been superseded by the more active preparations
 of the Malina Medicine. At a remedy, Sigisbee Bell
 speaks favourably of the whole our work in decoction.

Sigisbee is presently employed in the disease in
 the case to which it seems most particularly appropriate
 is that wherein the discharge of blood is slight, and there
 exists a rattling cough, pain in the side and breast, toge-
 ther with much weakness or in other words where symptoms
 of pulmonary disease continue after the violence of the
 inflammation is removed. Under these circumstances
 I would recommend the Kuppis acid as a remedy.

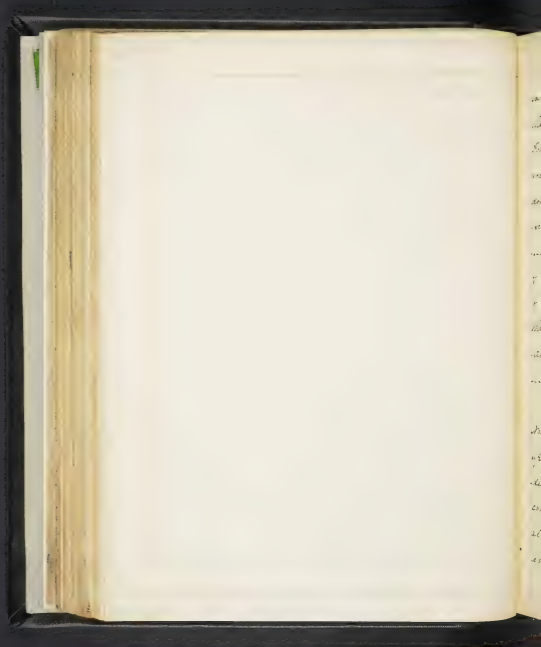
As one of the modes of treating Trachylytes, I find
 that Emulsi have been employed for a long time; they
 were originally introduced in the treatment of this dis-
 ease by Dr. B. Robinson of Dublin. In employing them
 it would be well to resort cautiously to other remedies,
 unless the system be reduced to that state wherein

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there is but a slight disturbance, they then may be considered as
 known & not judicious. I am not unconscious that it has been
 said that Dr. Keble who is considered a very good physician was
 in the habit of writing a chapter in all sorts of human ex-
 ercise with confidence in them above all other measures well on
 account of their safety & efficacy. But, on the whole I
 would consider in most cases more than recommending
 them, would be in an unnecessary & needless of manner.
 The same reason may be seen in the case and with peculiar
 advantage in febrile catarrhs, given in small doses.

A solution of the sulphate of zinc has been highly recom-
 mended for the same purpose by Dr. Coste & Morley
 and the late Dr. Berdon. The carbonate is considered to be
 a valuable and more important remedy and should be
 given according to the necessity & the case in small doses
 from a scruple to two grains, or what may answer better is
 combine with each dose about the fourth or sixth of a
 grain of Opium.

The ^{very} repurgant medicines are sometimes employed



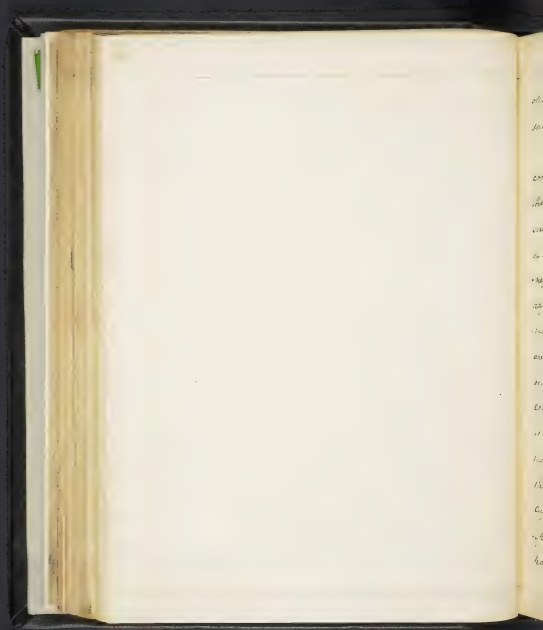
in the treatment of Pulmonary Hemorrhage. Among which are
 the several roots and many of the seeds. The Nitrate of
 Potash is the most useful especially in reducing vascular
 action, peevishness and excitement. It may be given in the
 dose of ten to thirty grains, taking care that it does not
 excite coughing, or it may be combined with mucous ex-
 tracts of the antimonial preparations. A still better mode
 of administering this medicine is by dissolving an ounce
 of it in a quart of water, and to take the whole of it in
 the course of a day. If it should be given in such occa-
 sions as it operates on the kidneys it is said that renge-
 rine effect will also result from the practice.

In addition to the preceding remedies I find the
 Diuretics have been employed with some advantage
 upon the principle of pushing irritation and sub-
 ducing arterial action. The Squalor which is generally
 considered to be associated with this class I have
 already spoken of. To which I may add the Cicuta
 and Senega and Gelsem. If the Cicuta and Senega



I have no knowledge in the treatment of the present disease, I shall oblige by its sedative effect I was, however, very sensible although condemned by some practitioners as a stimulant, which, however may be the case; yet the fact must be admitted that its effects are indispensable, particularly when the hemorrhage has been aggravated by the irritation coming upon us in the pulmonary organs by the action of coagulins or dyspnoea.

At present I have not noticed the state of the bowels, which should not be neglected; as soon as the flow of blood is checked the saline purgatives, such as the Eucrom salt &c. may be given from their operating with the least nausea or irritation. Castor oil if the stomach can retain it answers very well. Mlagnesia is, that is opiate coagulating, unless it is administered with lemon juice, or some acid drink after taking it. When the pulmonary affection is combined with some disorder of the digestive organs, the blue pill is recommended by Mr. Ferriestrey, every



other night. to be worked off the next morning by seven
pints of Cream of tartar.

I have now given the general plan of treatment, that is
commonly adopted in the most unscientific practitioners for
the relief of active hemorrhage from the lungs, and
will next say a few words on Passive hemorrhage,
or that debilitated action in which there is a weak-
ness of the pulse with much emaciation; it mostly
happens in the valentidians, and it is not uncom-
mon to find the patient so much exhausted that we
are deterred from bleeding; this circumstance is often met
owing to the common opinion which is in vogue (which)
consequently becomes confirmed, however the indication here
is clear, that we must at once interrupt and dissipate
this morbid cramp, and as usual to elicit, first in the
most approved manner we immediately resort to
cupping or leeching, seven or eight times a day
abstract of the first 4 of the system every half
hour. after we are fully relieved, blood is removed

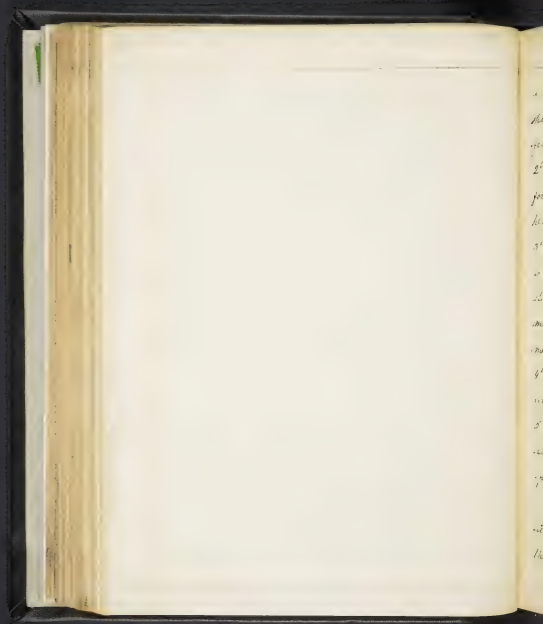


from these congested parts it tends to temper & support the
low & the system by the use of the Decocts of Cinna
or the Peruvian bark. And of the Mineral acids,
which claim attention in this stage of the disease, the
Sulphuric and Nitric are preferred, merely to support
the bleeding the sulphuric is the best, but to rectify
the system the Nitric is most commonly employed.

Both these remedies we generally treat febrile or haem-
orrhagic from the lungs, in which may be added,
provided the patient's system is previously fortified,
the natural use of moderate exercise on horseback,
or now riding diet as milk and eggs; and by malt
liquors especially Porter.

As Hemoptoe is sometimes connected with conse-
quential affections, there is a liability of its recurrence
from any slight provocation or void which the fol-
lowing prophylactic precepts should be strictly
observed.

1st— Avoid every circumstance which would have



a tendency to increase the circulation, hence we should direct a mild diet, gentle exercise, and a perfect abstinence from exciting causes of every kind.

2^d Avoid taking cold by every possible precaution, for nothing is so apt to produce a recurrence of the hemorrhage as catarrh.

3^d In cases where there is a strong predisposition to this disease, strict attention must be paid to the state of the chest, pulse, and respiration; which must all be regulated by the discriminating judgment of the practitioner.

4th If there exist any local affection, much good will result from the use of blisters or setons.

5th In obstinate cases salivation may be resorted to, by which the disease may possibly be supplanted.

I shall conclude by observing, that it sometimes happens with our very best treatment, that the disease resists all our endeavours,

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when as a last resource we should advise the removal of the patient to a warm climate and if possible to have him removed thither by a sea voyage. -

